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**8/11/2005 UTAH DEPARTMENT OF TRANSPORTATION  
APPLICATION TO OPERATE LONGER COMBINATION VEHICLES  
(LCV)  
EXCEEDING 81 FEET CARGO/CARGO CARRYING LENGTH**

(Please Type or Print the Following Information)

**Company Name:** \_\_\_\_\_ **USDOT #:** \_\_\_\_\_

**Physical Address:** \_\_\_\_\_

**City/State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City/State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Company Representative Name & Title:** \_\_\_\_\_

**Requested Routes:**

Terminal to Interstate: \_\_\_\_\_

Interstate Route(s): \_\_\_\_\_

Interstate to Terminal: \_\_\_\_\_

**NOTE:** Routes are Interstates & Freeways only, and (1) one traveled mile off and on for food, fuel, and to & from terminal or delivery. List all roads used.

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**Safety and Training Requirements:**

This is to certify that the above named company has an established and aggressive safety program, which as a minimum, is in compliance with 49 CFR Parts 387 – 399 of the Federal Motor Carrier Safety Regulations and has a satisfactory safety standing with the Department. You may find information on what constitutes an overall satisfactory standing with the Department by visiting [www.rules.utah.gov/publicat/code/r909-016.htm](http://www.rules.utah.gov/publicat/code/r909-016.htm)

The company also certifies that all drivers have been trained in accordance with 49 CFR Part 380 and Part 391, and are in compliance with the Utah Regulations for Legal and Permitted Vehicles.

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Print Name

Date

**Authorization:**

The permittee, as a condition for obtaining the permit, shall assume all responsibility for accidents, including injury to any persons or damage to public or private property caused by operations covered by it.

The permittee agrees to indemnify and hold harmless the Department, the Utah Highway Patrol, their officers, agents and employees from any and all claims resulting directly or indirectly from the transportation of LCV's on any public highway of the State.

Please attach a list of each power units to be permitted. Include the year and make, license number, unit number and horse power rating. Your company's Federal Safety Rating and required insurance will be checked electronically by the Department. By sending this request and signing your oversize/overweight permits you agree to all of the stipulations and requirements listed on this application and to abide by all State and Federal Laws, Rules, and Regulations pertaining to these combination vehicles.

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Route & Safety Approval, Manager, Ports of Entry

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Date

Accepted \_\_\_\_\_ Denied \_\_\_\_\_ Reason (s) \_\_\_\_\_

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**Note:** At the time any of the information provided in this application changes you are required to notify or contact the Department for approval, addition to, or deletions from your records. This could include addition or deletion of vehicles, route changes, address change, etc.

**Thank you:**

Utah Department of Transportation  
Richard Ollerton, Operations Manager  
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